FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000003685 (1)

Principal Piac 284 N.E. 25TI FT. LAUDERDA	Mailing Addres 2424 N.E. 25TH FT. LAUDERDAI										
	_							3. Date Incorporated or Qualified 01/12/1995		te of Last R 01/1996	eport .
2. Principal Place of Business			2a. Mailing Add	dress				4. FEI Number 65-0552894	<u> </u>		pplied For of Applicable
Sufte, Apt. #, etc.			Suite, Apt. #	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State			City & State	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24		Country 25	Zip 29		¢οι 30	intry	,	This corporation has liability for Florida Statutes		tax under s.	. 199.032,
		and Address of Curre	nt Registered Agent			_	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New R	egistered /	Agent	
SEL	DOMRIDGE	e, robert			i	81	Name				
2424 N.E. 25TH PL. FT. LAUDERDALE FL 33305						62	Street Add	ddress (P.O. Box Number is Not Acceptable)			
						83]				
						84	City		FI	85 Zip (Code
office or r agent. I a SIGNATURE		ent, or both, in the Stati ith, and accept the oblig or printed name of registered as						poration submits this statement for the ation's board of directors. I hereby according when reinstating)	DATE		
12.		OFFICERS AN	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFF	CERS AND		
TITLE NAME STREET ADDRESS CITY-\$T-ZIP	2424 N.I	IRIDGE, ROBERT E. 25TH PL. DERDALE FL 33305	<u>[]</u> [DELETE		AME Treet	ADDRESS ST-ZIP			Change	Addition
TITLE	-			DELETE	2.1 T					Change	Addition
STREET ADDRESS	1				L.		ADDRESS		المراجع المراجع		
CITY+ST-ZIP	L				. .		ST-ZIP				
TITLE				DELETE	3.1 T	TLE				Change	Addition
NAME					3.2 N		İ				
STREET ADDRESS CITY-ST-ZIP							ADDRESS				
TITLE	 			DELETE	4,1 T		ST - ZIP			Change	☐ Addition
NAME					4.21	IAME					
STREET ADDRESS	1				4.3 S	TREE1	ADDRESS				
CITY-ST-ZIP							ST-ZIP				
TITLE	ļ			DELETE	5.1 T		1			☐ Change	Addition
NAME	j				5.2 N)				
STREET ADDRESS	i				1		ADDRESS				
CITY-ST-7IP	1				■ t / r	IIY. 9	T.71P				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if crianged, or on an attachment with an address.

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4128197

Change

Addition

FILED

May 19 1997 8:00am

Secretary of State